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1851

ATLEE

OPERATIONS OF OVARIOTOMY, 1701-1851

No.	Date.	Operators.	Age.	Incision. Minor.	Incision. Major.	Incision. Unknown.	Recovered. Minor.	Recovered. Major.	Recovered. Unknown.	Died. Minor.	Died. Major.	Died. Unknown.	Operation unfinished.	No. Tumor.	Time of death.	Other diseases.	Adhesions.	Character of Tumor.	Cause of Death.	REMARKS.	REFERENCES.
1	----	L'Armourier	--	1	----		1	----		----	----		----		----	----	--	Abscess of ovary after parturition.	----		Hist. De Societe Roy. de Medecine at 1783, p. 296; and Edin. Med. Surg. Jour., v. 18, p. 532.
2	----	M. Dzoudi	--	----	----	1	----	----	1	----	----		----		----	----	--	Cyst	----	By incision, the use of tents, and subsequent extirpation of the mortified cyst.	
3	----	Mr. Galenzowski	27	1	----		1	----		----	----		1		----	----	Adhesions	------	----	Opened the tumor, tore up the cells, fixed it by ligature to the wound, and obtained a perfect cure.	Ibid., and Jeafferson's Essay, Lond. Med. Gaz., 1844–'5, p. 81.
4	1809	Dr. McDowal	--	----	1		----	1		----	----		----		----	----	None	Cyst	----	Cyst opened, dirty gelatinous fluid withdrawn, and sack removed; wound three inches to left of rectus muscle.	Amer. Jour. of Med. Sciences, from Eclectic Repository, p. 261.
5	----	do	--	----	1		----	1		----	----		1		----	----	Adhesions	Cyst	----	Both ovaries affected, cyst opened, blood and gelatinous matter escaped, adhesions to bladder and uterus; incision in the same place.	Ibid.
6	1816	do	--	----	1		----	1		----	----		----		----	----	None	Scirrhous ovary	----	Incision in linea alba.	Ibid.
7	1817	do	--	----	1		----	1		----	----		----		----	----	None	Scirrhous	----	Profuse hemorrhage.	Ibid.
8	1819	do	--	----	1		----	----		----	1		----		3d day	----	Adhesions	Cyst, with bone, hair, &c	Peritonitis	Incision on the left side.	[1849, Phila. Ibid., and Monthly Jour. of For. Med., vol. iii., p. 440,
9	----	Dr. Chrismar	--	----	----	1	----	----	1	----	----	1	----		----	----	--	------	----	----------	
10	----	do	--	----	----	1	----	----		----	----		----		----	----	--	------	----	----------	Ibid,
11	1819	do	47	----	1		----	----		----	1		----		36 hours	----	Adhesions	Cartilaginous and lardaceous.	Gang. of intestines	Extensive adhesions to colon, stomach and peritoneum; one gallon of yellowish green serum in abdominal cavity.	Ibid;
12	1820	do	33	----	1		----	1		----	----		----		----	----	Adhesions	Fibrous and cellular	----	Afterwards became pregnant.	Ibid.
13	2820	do	38	----	1		----	----		----	1		----		36 hours	Tub. of liv. and scirr. mes. glds	Adhesions	Lardaceous and cysts, with brownish size.	Perintonitis & gang.	Diseased and deformed from infancy, tumor varicose; pedicle four inches thick; acites.	Ibid.
14	1821	Dr. N. Smith	33	1	----		1	----		----	----		----		----	----	Adhesions	Cyst	----	Emptied cyst, and removed it.	Amer. Med. Recor., vol. 5, p. 124.
15	----	do	--	----	----	1	----	----	1	----	----		1		--	Dis'd uterus	--	Uterine tumor	----	The uterus was the most voluminous part of tumor.	Med. and Serg. Memoirs, by N. Smith; edited by N. R. Smith, p. 231.
16	----	do	--	----	----	1	----	----	1	----	----		1		----	----	Adhesions	Cyst	----	Sack emptied, but too adherent to be removed; slight peritonitis; sack and abdomen again filled.	Ibid.
17	1823	Dr. A. G. Smith	30	----	1		----	1		----	----		----		----	----	--	Cyst	----	Emptied the cyst and removed it.	N. Amer. Med. Jour., Jan. 1826.
18	1823	do	--	----	----	1	----	----	1	----	----		----		----	----	--	------	---	----------	New York Jl. of Med., Sept., 1843, p. 169.
19	----	do	--	----	----	1	----	----		----	----	1	----		----	----	--	------	2ndary hemorrhage	The aminal ligature used gave way prematurely.	Ibid.
20	----	Do. & McDowel	--	----	1		----	----		----	1		----	1	42 days	----	--	Conglomerate intestines.	----	Patient tapped herself ninety times.	Ibid.
21	1823	Mr. Lizais	27	----	1		----	1		----	----		----	1	---	----	--	------	----	Deceived by great obesity and distended fullness of the bowels.	Amer. Med. Recor., vol. 8th, p. 23.
22	1825	do	36	----	1		----	1		----	----		----		----	----	None	Ovarian tumor	----	Some hemorrhage, acites, other ovary diseased, but too adherent to be removed.	Churchill's Essay, and Jefferson's Essay, in Lon. Med. Gaz., 1844–5, p. 81.
23	1825	do	25	----	1		----	----		----	1		----		2d or 3d day	----	Adhesions	Ovarian tumor	Gang. of periton'm.	----------	Ibid.
24	----	do	34	1	1		--	1		----	----		1		----	----	--	Solid and vascular	----	Omental tumor; blood escaped. This case terminated fatally in 1850. It was found to be a fibrous tumor of the uterus, connected with its fundus by a narrow fold of peritoneum. Both ovaries were small and in their proper place. The uterus was attrophied.	Ibid., and Phillip's Table in Med. Chirurg. Trans., vol. 27, p. 472. Amer. Jour. of Med. Science, April, 1851, p. 511.
25	----	Dr. Quittenbaum	--	----	1		----	1		----	----		----		----	----	--	------	----	----------	Ibid.
26	1826	Dr. Granville	30	----	1		----	1		----	----		1		----	----	Adhesions	Cyst	----	Very adherent, incised largely, and carefully emptied.	Nelpeau's Oper. Surg., p. 528.
27	1827	do	40	----	1		----	----		----	1		----		3 days	----	--	------	----	Death attributed to venesection, under the false alarm of peritonitis.	Churchill's Essay, from Med. Gaz., Jan. 13, 1843.
28	1826	Dr. Martini	24	----	1		----	----		----	1		1		36 hours	----	Adhesions	Cartilaginous	Hemorrhage	Inseparably.	
29	1828	Diffenbaugh	40	----	1		----	1		----	----		1		----	----	Adhesions	Highly vascular	----	Startled at the size of the base of tumor and flow of blood on puncturing it, and operation abandoned on account of adhesions.	Velpreau's Oper. Surg., p. 523, and Lon. Med. Gaz., 1844–5, p. 81.
30	----	----------	--	----	1		----	1		----	----		1		----	----	Adhesions	------	----	Adhesions were such that the tumor was merely punctured; after incision a sanious matter continued to discharge for some time after, and patient ultimately recovered.	Arch. Giniral de Medicene, vol. 20, p. 92; also, Amer. Jour. Med. Science, July, 1847, p. 234.
31	1829	D. L. Rogers	20	----	----		----	1		----	----		----		----	----	Adhesions	Cyst	----	Cyst unintentionally opened, emptied, relieved of very extensive adhesions, and removed.	New York Med. and Phys. Jour., Jan., 1830, p. 285.
32	----	Anonymous	48	----	1		----	----		----	1		1		6th day	----	Adhesions	Cyst	----	Had been tapped five times in six months; had a broad base, and not removable from os innominatum.	Churchill's Essay from Foriep's Notzen.
33	----	Dr. Ritter	31	----	1		----	1		----	----		----		----	----	None	Cyst	----	First tapped, and two weeks after removed ovary.	Churchill's Essay.
34	1830	J. C. Warren	40	----	1		----	----		----	1		----		on table	----	None	Scirrhous	Hemorrhage	Ligature slipped.	Surg. Obser. on Tumors, by J. C, Wanen, p. 590.
35	1833	Mr. Jeaffreson	40	1	1		1	----		----	----		----		----	----	None	Cyst	----	Fluid evacuated, sac drawn out and removed.	Churchill's Essay.
36	1834	Mr. King	40	----	1		----	1		----	----		----	1	----	----	--	------	----	----------	Ibid.
37	1836	do	37	1	----		1	----		----	----		----		----	----	--	Cyst	----	Cyst emptied of 27 pints, drawn out and removed.	Lancet, Jan. 21, p. 586.
38	----	do	--	1	----		1	----		----	----		1		----	----	--	Omental tumor	----	----------	Med. Chirurg. Trans., vol. 27, p. 473.
39	1836	Dolhoff	23	----	1		----	----		----	1		----		2 days	----	None	Cyst	Peritonitis	Cyst emptied of 15 pints and removed.	Braithwait's Retro., Amer. ed., Not 7, p. 99.
40	----	do	27	----	1		----	----		----	1		1		8 hours	----	Adhesions	Solid	----	Declined removing it, being solid and fixed in pelvis by adhesions.	Ibid., No. 8, p. 101.
41	----	do	23	----	1		----	1		----	----		----	1	----	----	--	------	----	----------	Ibid.
42	1836	Mr. West	45	1	----		1	----		----	----		----		----	----	None	Cyst	----	Cyst emptied of 20 pints, drawn out and removed.	Lancet, Nov. 27, 1837.
43	----	do	23	1	----		1	----		1	----		----		----	----	--	Cyst	----	Cyst emptied of 24 pints, drawn out and removed.	Ibid., Oct. 14, 1839.
44	----	do	24	1	----		----	----		1	----		----		----	Shat'd const'n	--	Cyst	Sunk	Constitution much shattered previously.	Ibid.
45	1836	do	40	1	----		1	----		----	----		1		----	----	Adhesions	Cyst	----	Not removed on account of adhesions; had to be tapped afterwards.	Lond. Med. Gaz., 1844–5, p. 86.
46	----	Mr. Hargraves	40	1	----		1	----		----	----		1		----	----	Adhesions	Multilocular cyst	----	Not removed on account of adhesion.	Ibid.
47	1840	O. B. Phillips	21	1	----		----	----		1	----		----		6th day	Infl. muc. coat of bowels.	None	Cyst	Inflam of muc. coat of large intestines	Extensive ulcerations of the bowels of some standing; died from other disease, not operation.	Ibid., Oct. 9th, 1840.
48	1841	Dr. Stil'ing	22	----	1		----	----		----	1		----		----	----	None	Hemorrhage	----	----------	Brit. and For. Med. Review.
49	1842	Dr. C. Clay	40	----	1		----	1		----	----		----		----	----	Adhesions	Solid and fluid	----	Incision 27 inches; tumor 28 lbs.	Medical Times, No. 160.
50	1842	do	57	----	1		----	1		----	----		----		----	----	Adhesions	Cysts	----	Extensive adhesions; tumor 24 lbs.	Ibid. 161.
51	1842	do	39	----	1		----	1		----	----		----		----	----	Adhesions	Cysts	----	Incision 28 inches; tumor 73 lbs.; very extensive adhesions.	Ibid. 162.
52	1843	do	47	----	1		----	----		----	1		1		7th day	----	Adhesions	Anomalous	Inflammation	Adhesions extensive.	Ibid. 163.
53	1843	do	45	----	1		----	----		----	1		----		Immed'tly.	Dis. of uterus	Adhesions	Fleshy tubercle of uterus	Hemorrhage	Tumor and entire uterus, excepting the cervix, removed.	Ibid. 164.
54	1843	do	40	----	1		--	----		----	1		----		36 hours	----	Adhesions	Cysts	Hemorrhage	Ovarian tumor 26 lbs.; very extensive adhesions.	Churchill's Essay.
55	1843	do	22	----	1		----	1		----	----		----		----	----	Adhesions	Cysts	----	Tumor 26 pounds.	Ibid.
56	1843	do	40	----	1		----	1		----	1		----		36 hours	----	None	Cysts	Inflammation	----------	Ibid.
57	1843	do	42	----	1		----	1		----	----		----		----	Hydatids	Adhesions	Cysts	----	Tumor 31 lbs.; extensive adhesions.	Ibid.
58	1843	do	50	----	1		----	1		----	1		----		32 hours	----	None	Pelvic tumor	Exhaustion	Tumor 54 lbs.; very extensive adhesions.	Ibid.
59	1843	do	45	----	1		----	----		----	----		----		----	----	Adhesions	Hydatid	----	----------	Ibid.
60	1843	do	58	----	1		----	----		----	1		----		10th day	----	--	Pelvic tumor	----	Tumor 24 lbs. Dr. Clay says recovered operation.	Ibid.
61	----	do	--	----	1		----	1		----	----		----		----	----	Adhesions	------	----	Tumor 26 lbs.; very extensive adhesions.	Ibid.
62	1844	do	40	----	1		----	----		----	1		----		3 weeks	Uterine dis.	--	Uterine	----	A ligature was applied around the cervix, and the uterus and ovaries removed.	Ibid.
63	1845	do	35	----	1		----	1		----	----		----		----	----	None	Cyst with solid matter	----	Solid tumor, 9 lbs.; fluid and solid, 58 lbs; evacuated the cyst before extraction; patient returned into Wales 15 days afterwards. Subject to the disease 10 or 12 years. See p. 267.	
64	1846	do	51	----	1		----	1		----	----		----		----	----	None	Cystiform	----	Well 17 days after operation. See p. 267.	Med. Times, No. 282, Feb. 15th, 1845, Lee's Table.
65	----	do	--	----	1		----	1		----	----		----		----	----	--	------	----	----------	Ibid., No. 333, Feb. 14th, 1846, Lee's Table.
66	----	do	--	----	1		----	1		----	----		----		----	----	--	------	----	----------	Lee's Table.
67	----	do	--	----	1		----	----		----	1		----		14th day	Dis. of uterus	--	Ovarian and uterine	From a fall	Large ovarian tumor with enlargement of the uterus. Tumor and uterus removed. Death from a fall on 14th day. Incision had healed and patient convalescent.	Ibid.
68	----	do	--	----	1		----	1		----	----		1		----	----	--	------	----	Operation exploratory only, not finished.	Braithwaite, Pt. 19th, p. 282.
69	----	do	--	----	1		----	1		----	----		1		----	----	--	------	----	Operation exploratory only.	Ibid.
70	----	do	--	----	1		----	1		----	----		1		----	----	--	------	----	do do do ----------	Ibid.
71	----	do	--	----	1		----	1		----	----		1		----	----	--	------	----	do do do ----------	Ibid.
72	----	do	--	----	1		----	1		----	----		1		----	----	--	------	----	do do do ----------	Ibid.
73	----	do	--	----	1		----	1		----	----		----		----	----	--	------	----	do do do ----------	Ibid.
74	----	do	--	----	1		----	1		----	----		----		----	----	--	------	----	do do do ----------	Ibid.
75	----	do	--	----	1		----	1		----	----		----		----	----	--	------	----	do do do ----------	Ibid.
76	----	do	--	----	1		----	1		----	----		----		----	----	--	------	----	do do do ----------	Ibid.
77	----	do	--	----	1		----	1		----	----		----		----	----	--	------	----	do do do ----------	Ibid.
78	----	do	--	----	1		----	1		----	----		----		----	----	--	------	----	do do do ----------	Ibid.
79	----	do	--	----	1		----	1		----	----		----		----	----	--	------	----	do do do ----------	Ibid.
80	----	do	--	----	1		----	1		----	----		----		----	----	--	------	----	do do do ----------	Ibid.
81	--	do	--	----	1		----	1		----	----		----		----	----	--	------	----	do do do ----------	Ibid.
82	----	do	--	----	1		----	1		----	----		----		----	----	--	------	----	do do do ----------	Ibid.
83	----	do	--	----	1		----	1		----	----		----		----	----	--	------	----	do do do ----------	Ibid.
84	----	do	--	----	1		----	1		----	1		----		----	----	--	------	----	do do do ----------	Ibid.
85	----	do	--	----	1		----	1		----	1		----		----	----	--	------	----	do do do ----------	Ibid.
86	----	do	--	----	1		----	1		----	1		----		----	----	--	------	----	do do do ----------	Ibid.
87	----	do	--	----	1		----	1		----	1		----		----	----	--	------	----	do do do ----------	Ibid.
88	----	do	--	----	1		----	1		----	1		----		----	----	--	------	----	do do do ----------	Ibid.
																				NOTE.—In Dr. Robert Lee's analysis of 108 cases, I see, he says, forty-five cases are reported by Dr. Clay. We have only given him credit for forty operations, being all we have details of. Dr. Lane, he says, reports eleven cases We have only recorded six of his cases for the same reason.—B.	
89	1848	Do. & Brunson	--	----	1		----	----		----	1		----		44 hours	----	Adhesions	Cystiform	Shock of operation	Multilocular; largest cyst punctured; adhesion to omentum and bowels. Chloroform administered with happy effects. Did well for 24 hours. Got suddenly worse in 38 hours. Weight of abdominal contents, 30 lbs.	Prov. Med. and Surg. Jour.; also, Ranking, No. 9, p. 277.
90	1842	Mr. Walne	58	----	1		----	1		----	----		----		----	----	None	Cysts with solid base	----	----------	Lond. Med. Gazette.
91	1843	do	57	----	1		---	1		----	----		----		----	----	None	Cysts	----	Narrow escape, followed by phlegmasia dolens.	Ibid., August, 11th, 1843, p. 699.
92	1843	do	20	----	1		----	1		----	----		----		----	----	--	------	----	Tumor 28 lbs.	Ibid., February 23d, 1844, p. 686.
93	1843	do	24	----	1		----	1		----	----		1		----	----	Adhesions	Cysts	---	Extensive adhesions caused him to desist.	Ibid, October 13th, 1843, p. 47.
94	1843	do	45	----	1		----	----		----	1		----		----	Uterine dis.	None	Cysts, solid and fluid	----	Fibrous tumor of uterus resting against incision, is supposed to have caused death.	Ibid., March 10th, 1844, p. 723.
95	1843	Dr. Ashwell	--	1	----		----	----		1	----		1		----	----	--	Cyst	Peritonitis	Incision 1½ inches; sac partially withdrawn; an obstacle presenting, was again returned.	London Lancet, November, 1843, p. 155.
96	1843	Mr. Crisp	--	----	----	1	----	----	1	----	----		----		----	----	--	Cyst	----	----------	Ibid., December 30th, 1843, p. 366.
97	1843	Mr. Morris	37	----	1	1	----	1		----	----		----		----	----	--	------	----	----------	Churchlll's Essay.
98	1843	Mr. Southam	38	----	1		----	1		----	----		----		----	----	None	Cystic sarcoma	----	----------	Ibid., from Med. Gaz., 1843.
99	1843	do	--	----	----		----	1		----	----		----		----	----	--	Cystiform	----	Exploratory incision; cyst punctured and removed; 16 or 18 pints of clear, lemon-colored fluid. Hand introduced, &c. Ligature came away 49th day. Left ovary tapped and extirpated. See p. 269.	Prov. Med. and Surg. Jour., Sept. 10th, 1845, p. 561; also, Braithwaite's Retrospect, No. 12, p. 247.
100	----	----------	26	----	----	1	----	----		----	----	1	----		7th day	----	--	Cystiform	Peritonitis and constitutional debility.	Multilocular cyst, with cerebreform solid matter. Operation performed under apparently favorable circumstances. Tumor weighed 9 lbs.	Arch. Ginerale de Med, v. 22, p. 92; also, Amer. Jour. Med. Science, July, 1847, p. 234.

No.	Date.	Operators.	Age.	Incision.			Recovered.			Died.			Operation unfinished.	No Tumor.	Time of Death.	Other Diseases.	Adhesions.	Character of Tumor.	Cause of Death.	REMARKS.	REFERENCES.
				Minor.	Major.	Unknown.	Minor.	Major.	Unknown.	Minor.	Major.	Unknown.									
101	1843	F. Bird	35	1			1								----	----	None	Cyst	----	Sack punctured, emptied and excised.	Lond. Med. Gazette, March 22d, 1844, p. 832.
102	1843	do	21		1			1							----	----	None	Cyst and solid matter	----	Incision 5 inches; cyst emptied, withdrawn and excised.	Ibid., December 29, 1843, p. 409.
103	1844	do	21	1			1								----	----	None	Cysts	----	Followed by peritonitis, slight.	Ibid., December 8, 1843.
104	1844	do	35		1			1							----	----	Adhesions	Cysts	----	Many adhesions, sack emptied of firm gelatinous matter, and excised; incision 8 inches, tumor 35 lbs.	Ibid., August 18, 1843, p. 732.
105	1846	do	52	1			1								----	----	Strong pelvic ad.	Cysts	----	Cyst very thick and filled with deotestrum, tapped and extracted. There was no pedicle, and a small section of the uterus was removed with it. See p. 269.	London Lancet, Amer. Ed., April, 1846, p. 315.
106	----	do	--	1			1								----	----	Adhesions	Cystiform	----	Tumor adherent to pelvis and uterus. A segment of the cyst left attached.	Ibid.; also, Amer. Jour. Med. Science, Jan., 1851, p. 254.
107	1847	do	32			1			1						----	----	Adhesions	Cystiform	----	Multilocular; both ovaries extirpated. One of compound character weighed 20 lbs.; the other consisted of several cysts, weighed 4 lbs. Both adhered to abdominal walls, the larger one firmly to the omentum, an artery of which was tied. Rapid recovery without an untoward symptom. Menstruation both before and after operation uninterupted.*	London Lancet, Oct. 30, 1847, p. 467; also, Ranking's Abstract, No. 6, 1848, p. 246.
																				* We apprehend there has been an error in diagnosis of this case. Otherwise it presents a fac. which contradicts our best physiologists, who maintain that menstruation is a phenomena dependent upon the physiological action of the ovaria. If both ovaries were extirpated, and menstruation continued uninterupted, then indeed are all our notions wrong as to the functions of these bodies.—B.	
108	----	do	--	1						1					3d day	----	Adhesions	Large sessile tumor	----		Ibid., Nov. 23, 1850; also, Amer. Jour. Med. Science, Jan. 1851, p. 234.
109	----	do	--	1						1					3d day	----	Adhesions	Cystiform	----	Tumor bound down in the pelvis, causing unceasing suffering. Tapping required every 10 or 12 days.	Ibid.
110	----	do	--	1						1					5th day	----	None	----	----	Small tumor.	Ibid.
111	----	do	--	1						1					7th day	----	----	----	----	Large compound tumor.	Ibid.
112	----	do	--		1	1					1		1		2d day	----	Adhesions	----	----	Very large malignant mass, inseperably adherent posteriorly. Extreme suffering from distention by solid matter, and rapidly approaching death rendered the attempted operation justifiable.	Ibid., p. 235.
113	----	do	--	1			1						1		----	----	--	----	----	Small incision, then tapped.	Ibid.
114	----	do	--	1			1						1		----	----	--	----	----	Small incision, then tapped.	Ibid.
115	----	do	--	1			1						1		----	----	--	----	----	Incision of rather large size.	Ibid.
116	----	do	--	1			1						1		6 weeks	----	--	----	----	Small incision to ascertain the character of the adhesions, and of small tumor attached to the cyst, as well as to evacuate the contents. Patient advanced in life and exhausted by suffering. Lived six weeks.	Ibid.
117	----	do	--	1			1						1		----	----	--	----	----	Incision.	Ibid.
118	----	do	--	1			1						1		----	----	--	----	----	Incision, then tapped.	Ibid.
119	----	do	--	1			1						1		----	----	--	----	----	Incision, then tapped.	Ibid.
120	----	do	--	1			1						1		----	----	--	----	----	Incision, then tapped.	Ibid.
121	----	do	--	1			1						1		----	----	--	----	----	Incision, then tapped. Tapped several times afterwards.	Ibid.
122	----	do	--	1			1						1		----	----	--	----	----	Incision, then tapped. Tpped afterwards.	Ibid.
123	----	do	--	1			1						1		----	----	--	----	----	Incision, not tapped. Tapped afterwards and died.	Ibid.
124	----	do	--	1						1			1		2d day	----	--	----	Bursting of hepatic abcess.	Incision to ascertain adhesions and to remove very viscid contents; died next day from bursting of hepatic abscess into the peritoneal cavity, as proved by autopsey.	Ibid.
125	----	do	--	1			1						1		----	----	--	----	----	Small incision, then tapped. Afterwards tapped.	Ibid.
126	----	do	--	1			1						1		----	----	--	----	----	Incision collnœ.	Ibid.
127	----	do	--	1			1						1		----	----	--	----	----	Small incision. Tapped many times afterwards.	Ibid.
128	----	do	--	1			1						1		----	----	--	----	----	Incision, then tapped.	Ibid.
129	----	do	--	1			1						1		----	----	--	----	----	Incision, then tapped.	Ibid.
130	1846	J. L. Atlee	33		1						1				15th day	----	Adhesions	Cystiform	Inflam. of the lungs	Multilocular, weighed 45 lbs. Patient got along very well for several days, and took cold on slight exposure, which produced pneumonia. An autopsy was made and no abdominal or pelvic inflamation was discovered.	Not published.
131	1843	do	29		1			1							----	----	Adhesions	Cyst and hydatids	----	Both ovaries removed.	Amer. Med. Journal, January, 1844, p. 44.
132	1844	do	42		1						1				5th day	Dis. of uterus	Adhesions	Fibrous tumors of the uterus.	Hemorrhage	Four uterine tumors, with thick vascular pedicles; extensive adhesions. Hemorrhage from slipping of ligature.	Not yet reported.
133	1843	Mr. Heath	46		1						1				17 hours	Dis. of uterus	--	Uterine tumor	Hemorrhage	The uterus, tumor and all were removed.	London Medical Gazette, December 8, 1843, p. 309.
134	1843	Mr. Lane	28		1			1							----	----	None	Cyst	----	Phlegmasia dolens followed operation.	London Medical Gazette, 1844–5, p. 84.
135	1843	do	45		1			1							----	----	Adhesions	Solid and fluid	----	Two tumors; cyst emptied before removal.	Med. Chi. Trans., Phillip's Table.
136	1844	do	33		1			1							----	----	Adhesions	Multilocular cysts	----	Cysts emptied before removal.	Lond. Med. Gaz., 1844–5, p. 84, Mr. Jeaffreson's Table.
137	----	do	--		1			1							----	----	Adhesions	----	----		Phillip's Table.
138	----	----	--	1			1								----	----	--	Cystiform	----	Multilocular.	Med. Chi. Trans., Phillip's Table.
139	----	----	--		1						1				----	----	Adhesions	Cystiform	Peritonitis	Multilocular; adhesions to liver supra renal capsule; ascending cava; kidney and intestines posteriorly; no adhesions anteriorly. Lee page 268.	Ibid.
140	1841	Mr. Key	19		1						1				9th day	----	None	Multilocular cysts	Peritonitis	Large vessels on tumor.	From Gay's Hospital Rep., Oct., 1843, p. 473.
141	1843	Mr. Greenhow	29		1						1				7th day	Dis. of stom.	Adhesions	Dense and vascular cellular tumor.	Peritonitis	For four years previously frequent uterine hemorrhage.	Med. Chi. Trans., v. 27, p. 88; and Amer. Jour. Med. Sci., July, 1844, p. 251.
142	1843	Mr. B. Cooper	32		1						1				7th day	Mal. dis. uterus	Adhesions	Solid and cysts	Peritonitis	A portion of omentum had been included in ligature.	Ibid,, v. 27, p. 76; & Am. Jr. Md. Sci., April, 1844, p. 462.
143	1844	W. L. Atlee	61		1						1				6th day	----	None	Bilocular cyst	Insidious peritonitis	Colon involved in a broad pedicle; feeble constitution; both ovaries diseased.	Amer. Jour. Med. Sci., July, 1844, p. 43.
144	1844	do	24		1			1							----	----	None	Fibrous tumor of the uterus.	----	Thick fleshy pedicle, followed by violent peritonitis; intestines troublesome.	Ibid., April, 1845, p. 300.
145	1849	do	29		1			1							----	Procidentia uteri.	Adhesions	Fibrous tumor of ovary	----	Extensive and very firm adhesions to the bones of pelvis, and to the illiac vessels. Pouparts ligament was imbedded in the tumor and stretched across it. Complete procidentia uteri. Chloroform, 1 part, æther 2 parts, administered. Recovery without an unpleasant symptom. Pregnant twice since.	Ibid., October, 1849, p.
146	1849	do	33		1			1					1		----	Dis'd uterus	None	Uterine tumor	----	The uterus was large, and in consequence the tumor was not removed. The right ovary was as large as an orange, and the left one was also diseased. Chloroform mixture was administered. Rapid recovery. Operation exploratory.	Ibid., April, 1850, p. 318.
147	1849	do	25		1			1							----	----	Adhesions	Cystiform	----	One large cyst extensively adherent to the omentum by its anterior surface; four gallons of chocolate-colored fluid removed one week before, Weight of tumor 40 lbs. Chloroform mixture given. Rapid recovery; has been married since, and given birth to a fine healthy daughter, after an easy parturition of three hours.	Ibid., p. 328.
148	1849	do	43		1			1					1		----	Dis. of uterus	None	Uterine tumor	----	The uterus was enlarged, and had large cystiform bodies incorporated with it; therefore not removed. Chloroform mixture; rapid recovery. Operation exploratory.	Not yet published.
149	1849	do	39		1			1							----	----	None	Fibrous tumor of uterus	----	Fibrous tumor attached to the fundus of the uterus with a dense pedicle. Weight, 6 lbs. Chloroform mixture. Rapid recovery. Menses on at the time of the operation, and continued without interruption.	Not yet published.
150	1850	do	39		1						1				6th day	----	Adhesions	Cystiform	Peritonitis	Extensive adhesions. Two round strong cords; vascular; bound the cyst to the recto-vaginal cul-de-sac; requiring ligatures. Patient ate an orange on the fourth day, up to which time she was doing well, and soon after, inflamation set in. Chloroform mixture.	Not yet published.
151	1850	do	48		1						1				3d day	Obs. bowels, death impending.	Adhesions	Cystiform	Exhaustion	Multilocular. The cyst was inseparably adhering to the intestines and uterus. The adherent portions of the cyst were detached from the main tumor, and permitied to remain; spermatic artery cut and tied. Weight of tumor, 28 lbs. Chloroform mixture. The bowels had been obstructed for several days before the operation, and it was performed only with the view of arresting the progress of approaching death.	Not yet published.
152	1850	do	40		1						1				3d day	Ascites and anasarca—death impending.	Adhesions	Cystiform	Exhaustion	The cyst weighed 25 lbs., exclusive of about 2 gallons serum from the peritoneal cavity. Had been tapped for a cetes five times before. The lower limbs were auarat eaus and ulcerated, weeping away immense quantities of water. The omenteun was much thickened odeamatous and spread over the cyst, and almost inseperably adherent. Chloroform mixture. The operation was performed with the same view as the case above.	Not yet published.
153	1850	do	41		1			1					1		----	Dis. of uterus	None	Uterine tumor	----	The uterus was enlarged; chloroform mixture, which produces a state of catalepsy, rendering it extremely troublesome with the intestines; they were forced out, and could scarcely be returned. A favorable recovery and improved health, since the operation.	Not yet published.
154	1850	do	37		1			1							----	----	Adhesions	Cystiform	----	Multilocular; adhesion to the whole front of the abdomen and to the omentum A part of the cyst, as large as the palm of the hand, was left adhering to the walls of the abdomen at the umbilicus. Pedicle three or four inches long; round; as thick as the little finger. First cut the pedicle, and then picked out the vessels and tied them separately. Weight of tumor, 25 lbs; chloroform mixture; rapid recovery.	Not yet published.
155	1850	do	42		1			1							----	Anaemia	Adhesions	Cystiform	----	Multilocular; patient greatly enfeebled by previous disease. Adhesions to the intestines, bladder, rectum, and whole basin of the pelvis. A part of the cyst was left attached to the colon. Several cysts broke while removing them, and flooded the intestines. Pedicle about 4 inches long, and slender. Applied no ligation; used torsion. Pulse 130 at time of operation. Tumor 15 lbs; chloroform mixture; rapid recovery.	Not yet published.
156	1850	do	28		1						1				80 days	Pregnancy	Adhesions	Cystiform	Inanition from pregnancy.	Multilocular; had been tapped 16 times — 56 lbs. fluid removed at one tapping. The mass of the tumor was composed of two immense cysts. It weighed 81 lbs.; chloroform mixture. She was two months gone in pregnancy, at the time of the operation. She recovered from the operation, but this was followed by great irritability of stomach, in consequence of the stage of pregnancy, that she could not be nourished. She died 80 days after the operation No miscarriage.	Not yet published

No.	Date.	Operators.	Age.	Incision. Minor.	Incision. Major.	Incision. Unknown.	Recovered. Minor.	Recovered. Major.	Recovered. Unknown.	Died. Minor.	Died. Major.	Died. Unknown.	Operation unfinished.	No Tumor.	Time of Death.	Other Diseases.	Adhesions.	Character of Tumor.	Cause of Death.	REMARKS.	REFERENCES.
157	1851	W. L. Atlee	29	----	1	--	----	1	--	----	1	--	----	--	3d day	----	Adhesions	Cystiform	----	Multilocular; incision from the sternum to pubis, nearly. Very firm and extensive adhesion; some peritoneal effusion. Pedicle about 6 inches broad, filled with varicose veins; one of the cysts, a large one, was filled with partially washed crassamentum. Weight of tumor, 35½ lbs.; chloroform mixture.	Not yet published.
158	1844	F. Bird	21	1	----	1	1	----	--	----	----	--	----	--	----	----	--	Cyst	----	Contents of cyst, a light amber color, and contained a very small quantity of albumen.	Lond. Med. Gaz., August 16th, 1844.
159	1844	Ehrhartstein	36	----	1	--	----	----	--	----	----	--	----	--	----	----	None	------	----	Tumor tapped before extraction.	
160	1844	do	--	----	----	--	----	----	1	----	----	--	1	--	----	----	--	------	----	Serum continued to drain for some time from the aperture; afterwards changed to milky fluid, flowed for 9 weeks; wound cicatrized, and patient cured.	Med. Chi. Trans., vol. 27, p. 472. Phillip's Table. Arch. Generale de Medicene, v. 31, p. 427; also, Amer. Jour. Med. Sci., July, 1847, p. 233.
161	----	Dr. Hooper	47	----	1	--	----	1	--	----	1	--	----	--	30 hours	----	Adhesions	Solid tumor	----	Ascites.	
162	----	do	38	----	1	--	----	----	1	----	----	--	----	--	----	----	Adhesions	Solid	----	Malignant tumor.	Ibid.
163	----	McDonald	--	----	1	--	----	----	--	----	----	--	----	--	----	----	None	------	----	----------	Ibid.
164	----	Clorissmann	--	----	1	--	----	----	--	----	----	--	----	--	----	----	None	------	----	----------	Ibid.
165	----	Dr. Groth	--	----	1	--	----	1	--	----	1	--	----	--	----	----	--	------	----	----------	Ibid.
166	----	Morgan	--	1	----	--	----	----	--	1	----	--	1	--	----	----	--	------	----	Portion of fluid removed before extraction.	Ibid.
167	----	A. B.	--	----	1	--	----	1	--	----	1	--	1	--	----	----	--	------	----	----------	Med. Chir. Trans, v. 27, p. 474.
168	----	C. D.	22	1	----	--	1	----	--	----	----	--	----	1	----	----	Adhesions	------	----	----------	Ibid.
169	----	E. F.	--	----	1	--	----	1	--	----	1	--	----	--	----	----	--	------	----	----------	Ibid.
170	----	G. H.	--	----	1	--	----	1	--	----	1	--	----	--	----	----	Adhesions	------	----	----------	Ibid.
171	----	Cascin Gooch	--	----	1	--	----	----	--	----	----	--	----	1	----	----	--	------	----	----------	Ibid.
172	1839	Guy's Hospital	--	1	----	--	----	----	--	1	----	--	1	--	----	----	--	------	----	----------	Ibid.
173	1844	Dr. Bowles	26	----	1	--	----	----	--	----	----	--	----	--	----	----	Adhesions	Cysts	----	Not removed on account of adhesion.	London Medical Gazette, 1844–5.
174	1844	Prof. Webster	37	----	1	--	----	----	--	----	----	--	1	--	----	----	Adhesions	Solid	----	----------	Western Lancet, October, 1844.
180	1844	W. B. Page, Esq.	33	----	1	--	----	1	--	----	----	--	----	--	----	----	Adhesions	Cyst	----	Not removed on account of adhesions. The patient rapidly recovered from the operation, after the peritoneal cavity had been exposed for 2 hours, but the disease progressed, and she died from the disease in about 2 months.	Not yet reported.
181	1846	do	39	1	----	--	----	----	--	1	----	--	----	--	12 hours	----	None	Cystiform	----	Cyst opened and withdrawn; hand introduced into abdomen.	London Lancet, April 5, 1844, p. 397; Lond. Ed., p. 84.
182	1845	Mr. Jno. Dickin	18	----	1	--	----	1	--	----	----	--	----	--	----	----	Adhesions	Cystiform	Hemorrhage	Cyst first tapped and withdrawn, adhering to several inches of intestine; but previous to the operation supposed to be non-adherent. A portion of the pedicle escaped from the ligature, whence arose the hemorrhage.	Ibid., December 12th, 1049; also, Ranking's Abstract, Amer. Ed., No. 5, p. 251, 1847.
183	1845	Mr. G. Southam	38	----	1	--	----	1	--	----	----	--	----	--	----	----	None	Cystiform	----	Multilocular; weight 28 lbs.; recovered without a bad symptom. Ligature came away in 3 weeks; each artery tied separately. The whole pedicle was not included; left ovary healthy. Lee on tumors of the uterus, p. 271.	Provincial Med. and Surg. Journal, Oct. 7th, 1845; also, Ranking's Abstract, No. 2, p. 186.
184	----	do	--	----	----	1	----	----	--	----	----	1	----	--	6th day	----	--	Cystiform	Peritonitis & constitutional debil	Exploratory incision; cyst punctured, and removed 16 or 18 pints clear lemon-colored fluid. Hand introduced, &c. Ligature came away on the 49th day. Left ovary tapped and extracted. Lee, p. 269.	Ibid., Sept. 10th, 1845, p. 561; also, Braithwait's Retrospect, No. 12, p. 247.
185	1845	Dr. Handyside	20	----	1	--	----	----	--	----	1	--	----	--	70 days	----	--	Cystiform	Ilius & phlebitis of lower limbs.	Multilocular cyst cerebriform solid matter; operation performed under apparently favorable circumstances.	Arch. Gen. de Medecine, v. 20, p. 92; also, Amer. Jour. Med. Science, July, 1847, p. 234.
186	----	Dr. Huynz	--	----	----	1	----	----	--	----	1	1	----	--	10th day	----	Adhesions	------	Exhaustion	Both ovaries diseased and extracted. Lee, p. 271.	Edinburgh Med. and Surg. Jour., 1846; also, Am. Jour. Med. Science, April, 1846, p. 582.
187	----	do	--	----	----	1	----	----	--	----	----	1	----	--	6 weeks	----	Adhesions	------	Peritonitis	Removal impossible, from adhesion. No regard paid to temperature during the operation.	Brit. and For. Med. Rev., Forbes' Amer. Ed., Jan., 1847
188	1846	Mr. Solly	20	1	----	--	----	----	--	1	----	--	----	--	11 hours	----	None	Cystiform	Hemorrhage internal.	A portion of omentum removed with the tumor. No regard paid to temperature during the operation.	Ibid.
189	----	Mr. W. (B. K. S. W.)	--	----	1	--	----	----	--	----	1	--	----	--	6th day	Exhaustion before operation.	None	------	Peritonitis	Unilocular cyst of right ovary. Hemorrhage from slipping of the ligature. A portion of the pedicle, containing the fallopian tube, slipped from the ligature, and gave rise to hemorrhage. Lee, p 271.	Ibid.; also, Lond. Med. Gaz., July 10th, 1846; also, Braithwait's No. 14, p. 317.
190	1846	Dr. Pr. Smith	39	----	1	--	----	----	--	----	1	--	----	--	4 hours	Chrn. peritonis	None	Cystiform	Shock of Operation	Exhaustion after 3d day. Great tympanitis.	Lee's Tables.
191	1846	Mr. Arrowsmith	22	1	----	--	1	----	--	----	----	--	1	--	----	----	Adhesions	Cystiform	----	Multilocular; tumor weighed 20 lbs.; fluid 10 lbs. Lee, p. 271.	Phillip's Table.
192	1846	H. E. Burd	26	----	1	--	----	1	--	----	----	--	----	--	----	----	None	Uterine tumor	----	Multilocular. An exploratory incision was made, of a few inches in extent, but the adhesions were so strong and extensive that the operation was considered unjustifiable. The patient recovered without any untoward symptom. Lee, p. 271.	Ibid.
193	1846	Mr. W.	--	----	1	--	----	1	--	----	----	--	----	--	----	----	--	------	----	Multilocular. The largest cyst was tapped after the incision, and over 8 gallons of glairy fluid were withdrawn; after which the tumor was drawn out. The pedicle was very thick, requiring three strong twine ligatures in different compartments, and each vessel was separately tied besides. Much alarm was excited subsequently, by the frequent occurrence of collapse, which was relieved by the administration of opium, ammonia and brandy. Tumor weighed 50 lbs. The patient was 3 or 4 months gone in pregnancy, and aborted 40 hours after the operation.	London Medical Gazette, April, 1847; also, Ranking's Abstract, No. 5, p. 249,
194	1846	Cæsar Hawkins	18	1	----	--	1	----	--	----	----	--	----	--	----	----	None	Cystiform	----	----------	Lee's Table.
195	----	R. D. Mussey	--	----	----	1	----	----	1	----	----	1	----	--	----	----	Adhesions	----	----	Unilocular; ligature came away from the 22d to the 25th day. The wound entirely healed on the 29th day. Lee, 271.	Medical Gazette, October 30, 1846.
196	----	do	--	1	----	--	1	----	--	----	----	--	----	--	----	----	None	Cyst	----	Operation not completed in consequence of numerous and extensive adhesions. Wound kept open by a tent. A clear liquid came away for several days, then became perulent; diminished gradually; ceased in three weeks; closed and the tumor disappeared. A year after, she was delivered of her 14th child, and no return of disease.	Amer. Jour. of Medical Science, February, 1838, p. 380.
197	1850	do	--	----	1	--	----	----	--	----	1	--	1	--	14 hours	Uterine	--	Uterine tumor	Exhaustion	Unilocular; incised the abdomen, and drew off the fluid from the sack, which was secured to the edges of the wound by suture; wound kept open by tent. The discharge gradually diminished, being first serum, then purulent. The patient's health improved, and for nearly a year she was able to see to her domestic affairs. The wound finally closed, the disease returned and the patient died, about 13 months after the operation.	Case not reported.
198	----	Mr. Bainbridge	31	1	----	--	1	----	--	----	----	--	----	--	----	----	--	Cystiform	----	Tumor in the walls of the uterus.	From Dr. Mussey, himself.
199	1844	Dr. Waseikowski	40	----	1	--	----	1	--	----	----	--	----	--	----	----	--	Scirrhus	----	Unilocular; incision 3 inches long; a portion of cyst drawn out, contents evacuated; a portion of cyst then removed; its edges fixed to outer wound, and suppuration induced. On the 5th day the discharge became purulent, and was maintained so by stimulant injections. In three months the discharge gradually diminished, and the general health completely restored.	Prov. Med. Jour., December 16, 1846; also, Braithwait, No. 5, p. 250.
200	1835	Dr. Bellinger	35	----	1	--	----	1	--	----	----	--	----	--	----	Hydrop. uteri	--	------	----	Tumor, weight 6½ lbs. Woman in labor; had gone 3 months beyond her time. Uterus forced out of the vagina. Trocar removed 35 *litres* of yellowish fluid; day after removed tumor, by incision from 3 inches above the umbilicus to the pubis, and 30 *litres* more of fluid. No bad symptoms followed. She walked home to a neighboring house, the 21th day afterwards. She was delivered of a boy 13 months afterwards, and of another boy in December, 1846.	Jour. de Medecine, v. 20, p, 92; also, Amer. Jour. Med. Sci., July, 1847, p. 233.
201	----	do	--	----	----	1	----	----	1	----	----	1	----	--	----	----	Adhesions	Several tumors	----	Incision extended nearly to the enciform cartilage. The tumor was removed by cutting the rownd and broad ligaments. Two arteries of considerable size were tied with animal ligature, both ends of which were cut off close to the knot. A tumor in the pelvis was formed by the uterus distended with a large quantity of dark watery fluid, which escaped through a rent made by the finger, through its posterior walls. The patient was still living and in good health, May, 1847. Menstrnation never returned.	South. Jour. Med. and Phar., May, 1847; also, Wood's Quarterly Retrospect, July, 1847, p. 21.
202	1846	Anonymous	30 35	----	1	--	----	----	--	----	1	--	----	--	5th day	Dis. of uterus	None	Uterine	Peritonitis	Operation abandoned, from finding the peritoneum adherent along the line of the incision.	Ibid., p. 22.
203	1848	Dr. S. Parkman	27	----	1	--	----	----	--	----	1	--	----	--	12 hours	----	--	Uterine	Hemorrhage	The lateral ligaments were divided; were very vascular, and many arteries were tied with animal ligatures; the neck of the uterus was cut across about ¾ of an inch above the os tince, and the entire tumor (the uterus) removed. There had been no internal hemorrhage.	Ibid.
204	1701	Dr. R. Houstown	58	----	1	--	----	1	--	----	----	--	----	--	----	----	--	Cystiform	----	Fibrous tumor developed in the fundus of the uterus; weighed nearly 9 lbs. Pedicle formed by the body of the uterus, about two inches in diameter. The left fallopian tube removed with the tumor. Both ovaries were left in the pelvis; supposed to have contained fluid; attempts at tapping; wrong diagnosis; contained only a clear serous fluid in its interstises or meshes. Half of the pedicle was not firmly constricted by the ligature, and patient sunk from hemorrhage.	Amer. Jour. Medical Science, April, 1847, p. 371.
205	1848	Dr. H. Miller	37	----	1	--	----	1	--	----	----	--	----	--	----	----	Adhesions	Cystiform	----	With a strong fir stick wrapped with lint, and thrust into the cyst, twining and winding it, above two yards long of a *substance like glue*, was drawn out, which was followed by 9 quarts of such matter, and several hydatids larger than an orange. Dressed by the interrupted suture. Lived in perfect health until 1714.	Philosop. Trans., Abridged, vol. 7, p. 541.
206	1848	Dr. J. Deane	46	----	1	--	----	1	--	----	----	1	----	--	----	----	--	Uterine	----	Multilocular; extensive adhesions to omentum and parietes; easily loosened. Two cysts punctured to diminish the size, from which flowed a whitish ropy albuminous looking fluid. The emptied tumor weighed 9¼ lbs. Chloroform employed.	Lond. Med. Gaz., June 23d, 1845; also, Amer. Jour. Med. Science, July, 1849, p. 205,
																				Fibrous tumor of the uterus. The tumor, whose length was about 8 or 9 inches, and breadth 5 or 6 inches, embraced the entire left half of the uterus, from which it was considered impossible to separate it, and therefore the further prosecution of the operation was deemed impracticable. Chloroform was used, but its effects were considered very deleterious. The symptoms for several days were very alarming, but she finally recovered from the greatest perils.	Boston Med. and Surg. Jour., Oct. 11th, 1848; also, Amer. Jour. Med. Science, Jan., 1849, p. 253.

Cases No. 175, 176, 177, 178 and 179 not found in copy.

No.	Date.	Operators.	Age.	Incision.			Recovered.			Died.			Operation unfinished.	No. Tumor.	Time of death.	Other diseases.	Adhesions.	Character of Tumor.	Cause of Death.	REMARKS.	REFERENCES.
				Minor.	Major.	Unknown.	Minor.	Major.	Unknown.	Minor.	Major.	Unknown.									
207	1849	Dr. J. Deane	45	----	1		----	----		----	1		----		12th day	----	None	Cystiform	Inflam. and gang. of the intestines.	Incision from pubis to sternum, nearly, which was completed after tapping the cyst, which collapsed into the pelvis. The small intestines were brightly injected, congested or inflamed. In other respects all the viscera healthy. Things went on well for a week, and on the 4th day union was accomplished. Afterwards, inflammation of the intestines, constipation and vomiting supervened, and death. A post mortem examination revealed gangrene of the intestines, and parts adjacent to the pedicle. Weight of tumor, 40 lbs.	Dr. James Deane's letter to me, (Prof. W. L. Atlee,) dated, Greenfield, Mass., April 8th, 1851.
208	1848	P. J. Buckner	32	----	1		----	1		----	----		----		----	----	--	Cystiform	----	Multilocular. The large sack being extensively adherent to the peritoneum, it was unavoidably punctured, and 18 pints of a dirty, opaque cream-colored fluid, of the consistence of pus, discherged. After this, the posterior wall of the cyst was divided, and several bands of organized lymph, severed by the knife. The sack was now torn from its adhesions, which extended above and below the umbilicus, and across the linea semilunaris. The patient remarked, that the act of separating the sack from the walls of the belly, reminded her of tearing the leaf-lard from pork. From another cyst, 6 pints of fluid were removed; this was another division of the tumor adhering extensively to the peritoneum, which was ruptured and bled freely, requiring ligatures. The pedicle was on the right side, embracing the fallopian tube and ovary, and about two inches in diameter, and highly vascular. Patient did not loose 4 ounces of blood. Operation lasted 1¼ hours. Tumor weighed 28½ lbs. Solid part, 4½ lbs.	Western Lancet and Hosp. Report, October, 1848.
209	1848	do	--	----	1		----	1		----	----		----		----	----	--	Fibrous tumor	----	Weight of tumor, 4½ lbs.	Ibid., p, 213.
210	------	do	--	----	1		----	----		----	1		----		6th day	----	----	------	Peritonitis		Amer. Jour. Med. Science, October, 1849, p. 563.
211	1850	do	39	----	1		----	1		----	----		----		----	----	Adhesions	Cystiform	----	Many alarming and dangerous symptoms followed.	Ibid., from Ohio Med. and Surg. Jour., September, 1850.
212	1850	Dunlap & Buckner	--	----	1		----	1		----	----		----		----	----	Adhesions	Cystiform	----	Multilocular. Incision from 3 inches above umbilicus to pubis; the largest cyst punctured, and about one gallon of mucilaginous fluid evacuated. Numerous adhesions were found to exist between omentum, intestines, peritonem, which being separated, the pedicle found to arise from right ovary. This was tied by a double ligature; divided, and tumor removed. The ligature came away in about 20 days. Operation occupied 25 minutes. Weight of tumor, 20 lbs.	Not yet published. Note.—Since published in the Western Lancet. See, also, body of report.—B.
213	1848	Dr. Meeker	32	----	1		----	----		----	1		----		6 hours	----	Adhesions	Cystiform	Hemorrhage	Multilocular. Incision 22 inches, adhesions to omentum parietes, and small intestines, readily separated. Pedicle to the right ovary, 2½ inches broad, and two inches in length. Oparation lasted 45 minutes. The ligature slipped from half the pedicle, the cavity filled with fluid blood, and the patient was exhausted by the hemorrhage. The tumor weighed 40 lbs., 3 ounces.	Supplement to Boston Med. and Surg. Journal, September 6, 1848, p. 116.
214	------	M. H. Larry	--	----	----	1	----	----	1	----	----		----		----	----	--	Pilous ovarium	----		Mem. del'Acad. Roy. de Md. Tr. xii, & xii, Paris, 1646–48.
215	------	Mr. Arnott	--	1	----		----	----		----	----		1		74 hours	----	Adhesions	Cystiform	----	Multilocular. Extensive adhesions, on which account the operation was not completed. Dr. Clay attributes the failure, to the small incision.	Med. Gaz., Abstract Rec. No. 12; also, Ranking's Abstract, December, 1848, p. 246.
216	1847	Dr. Vangirard	25	----	1		----	1		----	----		----		----	----	--	Cystiform	----	Tapped 50 times in 3⅓ years. The cyst was first tapped and then removed. The tumor was cartilagiuous, gelatinous and cerebriform. Weight, 9 lbs.; ether inhaled. Incision to the left of, and parallel with the linea alba. The pedicle was attached to the left side. The patient was well at the end of a month.	Jour. de Scien. Medico—Chireng; also, Rankin's Abstract, December, 1848, p. 246, and No. 9, p. 275.
217	1849	Prof. Bayless	--	----	1		----	1		----	----		----		----	----	--	------	----	Tumor weighed 18 lbs.	Trans. of Amer. Med. Association, vol. 5, p. 379.
218	------	Anonymous	--	----	1		----	----		----	1		----		----	----	--	Extra uterine	----	Tumor weighed 26 lbs.	Baltimore paper.
219	------	M. Sneffard	40	----	----	1	----	----	1	----	----		----		----	----	Adhesions	------	----	The tumor of an extra uterine fœtus. This was the 6th pregnancy. The fœtal movements were perceptible up to the 6th month; then ceased, and were followed by excessive pain and hemorrhage. Six months after this, the tumor was discovered in the right groin. At the operation, two cysts were removed; one was filled with adipocier, closely adherent, and forming one cavity into the uterus, its fundus being destroyed. The other cyst contained the limbs and trunk of a fœtus, the head and upper extremities having escaped into the general cavity of the peritoneum, and adhering firmly; both were removed. Ether was administered; patient recovered.	Rankin's Abstract, vol. 9, p. 279; also, Amer. Jour. Med. Science, Octtober, 1849, p. 522.
220	1849	Jno. Crouch, Esq	24	----	1		----	1		----	----		----		----	----	Adhesions	Cystiform	----	Multilocular; left ovary. Weight of tumor 14 lbs. Rapid recovery. The cysts tapped before their removal.	Prov. Med. and Surg. Jour., Sept. 5th, 1849; also, Amer. Jour. Med. Science, January, 1850, p. 221.
221	1849	F. Elkington	31	----	1		----	1		----	----		----		----	----	Adhesions	Cystiform	----	Multilocular. Adhesions slight; pedicle very broad and vascular. Weight of tumor, 40 lbs. Rapid recovery.	Ibid., Sept. 19th, 1849; also, Amer. Jour. Med. Science, January, 1850, p. 220.
222	1849	W. H. Vanburen	21	----	1		----	1		----	----		----		----	Uleri procidentia.	Adhesions	Fib. tumor of the ovary	----	Complete procidentia uteri. Three vessels of the omentum tied, and ligatures cut off close to the knot. About 20 ounces of serum in the peritoneal cavity. Weight of tumor, 7 lbs.; circumference, 23 inches. Chloroform mixture.	New York Jour. Med. and Collat. Science, March, 1850, p. 159.
223	1849	J. H. Bigelow	22	----	1		----	1		----	----		----		----	----	--	Cystiform	----	Multilocular; had been previously tapped. A multilocular tumor was first removed, weighing 8 lbs. Afterwards, a fibrous tumor was removed from deep in the pelvis — weight, ¾ lb.	Boston Medical and Surg. Jour., Jan. 23, 1850, p. 503.
224	1849	A. March	49	----	1		----	1		----	----		----		----	----	None	Cystiform	----	The pedicle was severed half an inch from the ligature, which slipped off while sponging the wound, and alarming hemorage ensued. The vessel was immediately secured by transfixing the pedicle with an armed ligature. ⅝Weight of tumor, 18 lbs. Chloroform mixture given.	Dr. March's Pamphlet.
225	1847	D. Prince	25	1	----		1	----		----	----		1		----	----	Adhesions	Solid ovarian tumor	----	The tumor was adherent to the anterior walls of the abdomen; incision 3 inches. A free incision was made into the tumor, and a portion of its interior removed. The wound was left open, and a teat introduced. A large amount of pus was discharged, for a long time, and the tumor entirely disappeared. April 10th, 1849, a healthy daughter born.	Amer. Jour. Med. Science, July, 1850, p. 217.
226	1850	A. H. Grimshaw	37	----	1		----	----		----	1		1		5 hours	----	Adhesions	Cystiform	Hemorrhage	Had been tapped 9 times — last time, 10 days before the operation; 5 gallons of fluid removed; walls of the abdomen.	
227	1850	W. E. Duffin	38	1	----		1	----		----	----		---		----	----	None	Cystiform	----	Incision 3 inches; cyst tapped, and drawn out 180 ounces of brown colored, ropy viseid fluid. Woman as large as the 8th month of pregnancy.	London Lancet, Nov. 23, 1850; also, Amer. Jour. Med. Science, January, 1851, p. 226.
228	1850	C. R. Peaslee	25	----	1		----	1		----	----		----		----	----	Adhesions	Cystiform	----	Both ovaries removed; weight of left ovary, with the contents, 29 lbs. of *right*, 10 drachms. Menses returned 72 hours after operation, and continued three days; 4 ligatures — 3 came away by untying themselves, and one with a *loop*. Unmarried; anesthusia.	Amer. Journ. Med. Science, April, 1851, p. 371.
229	1850	Geo. Norman	23	----	1		----	1		----	----		1		----	----	Adhesions	Solid ovarian tumor	----	Operation unfinished, in consequence of adhesions. Tumor diminished to half its size, rapidly, after the operation.	Prov. Med. and Surg. Jour., January, 5, 1851; also, Amer. Jour. Med. Science, April, 1851, p. 509.
230	1850	J. Farrel	28	----	1		----	----		----	1		----		----	----	Adhesions	Cystiform	----	Tapped five times previous to operation. Incision 8½ inches. Extensive adhesions existed, to the intestines, uterus, and walls of the abdomen; also, at one of the sites of a previous tapping. It was deemed improper to attempt its removal. The wound healed, except where a broad meche was introduced into the sack. The discharge, which was at first serous, became purulent and footed, continued until her death, which took place 22 months from first tapping. Left ovary diseased.	Reported to committee of Ohio State Medical Society, 1851, on Ovarian Disease — Not yet published.
231	1850	J. Farrel	--	----	1		----	1		----	----		----		----	----	None	Multicular	----	Cyst opened and emptied before removal; with it, many smaller ones was situated in the right ovarium. The pedicle and fallopian tubes were secured by ligature, and the tumor removed. Incision 10 inches. Ligature came away 32d day; wound healed very slowly by granulation.	Ibid.
232	------	A. Dunlap	--	----	1		----	1		----	----		----		Sev'l weeks after oper'n	----	--	Multicular	Diabetis and disease of kidneys.	This case is given by P. J. Buckner, from the statement of a medical friend. The particulars of the case not known to Reporter.	Case has never been reported.
233	------	E. K. Chamberlain	--	----	----	1	----	1		----	1		---		Immed'tly	----	--	------	----	----	From Dr. Chamberlain, himself.
234	1848	H. G. Potter	36	----	1		----	----		----	1		----		17th day	----	Adhesions	Cystiform	Diarrhœa and peritonitis.	Both ovaries diseased. Incision from 20 to 24 inches long. Both cysts emptied before being tied; only two-thirds of the right cyst removed. Autopsey discovered that this tumor was firmly united to the bladder, uterus and walls of the pelvis. Peritonitic symptoms were almost entirely absent, although the bowels were found agglutinated together, and several ounces of pus were found in the pelvis. Cloroform was administered, and with entire relief from pain.	Lond. Med. Gaz., new series, vol. 6, 1848, p. 1066; also Amer. Jour. Med. Science, July, 1849, p. 205.
235	------	Franckenau	--	----	----	1	----	----	1												
236	------	Pott	--	----	----	1	----	----	1											"Each report a case of extripation of the ovary, which did not prevent the females from enjoying excellent health afterwards."	The Lancet, 1828, vol. 1, p. 878; also, Velpeau's Surgery, p. 538, by Mott.
237	------	Lassus	--	----	----	1	----	----	1						----	----	--	------	----		
238	------	M. Deneux	--	----	----	1	----	----	1												
239	------	M. Grath	--	----	----	1	----	----		----	----	1	----		16 hours	----	--	------	Hemorrhage	----	L'Experience, T. I., p. 631; also, Velpeau's Operative Surg. p. 538: by Mott.
240	------	do	--	----	----	1	----	----		----	----	1	1		8 hours	Epip. cribbled with tumors.	--	------	----	----	Ibid. p. 632; Ibid. p. 536.

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